Declaration of Mail-in (Garden River First Nation – GRFN Band member) Voter

I, Click here to enter Name

DO SOLEMNLY DECLARE THAT:

1. I am a registered Member of the Click here to enter First Nation Name First Nation, with a band membership/registry number Click here to enter membership/registry number And will be 18 years of age or older on GRFN Community Trust Community Approval Vote Day – September 17, 2015.
2. My date of birth is Click here to enter date of birth.
3. I live at Click here to enter address.
4. I have read and understand the mail-in information package sent to me regarding the Community Approval Vote, and I am voting freely, without compulsion or undue influence of anyone. I understand that by using this mail-in voting procedure, I will not be permitted to vote in person at the Vote.
5. I have folded the ballot, hiding my mark and showing the initials marked on the back, and I have placed the ballot in this ballot envelope.

SIGNED THIS DAY, Click here to enter a date. at Click here to enter town, province/state.

In the presence of:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature of Voter)

OR

Signature of person enlisted to assist the voter and signing on behalf of the voter.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Witness’ Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Witness, please print name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Witness’ Address)

OR

The person who completed and signed the declaration of Mail-in Voter form was enlisted to assist Click here to enter Voters Name, who is the person whose name is set out above, and the mail-in ballot was marked according to his/her directions.

(witness must be 18 years of age or older and is attesting that the Voter signing the Declaration of Mail-in is the person whose name is set out in the form.)